## **Application Data Sheet**

#### **Application Information**

Application number:: N/A

Filing Date:: 04/13/04

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: Priority Binding

Attorney Docket Number:: MSFT-3489/307340.01

Request for Early Publication?:: NO

Request for Non-Publication?:: NO

Suggested Drawing Figure:: 6

Total Drawing Sheets:: 9

Small Entity?:: NO

Latin name::

Variety denomination name::

Petition included?:: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: NO

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: Ted

Middle Name:: Andrew

Family Name:: Peters

Name Suffix::

City of Residence:: Bellingham

State or Province of Residence:: Washington

Country of Residence::

Street of mailing address:: 1421 Cowgill Avenue

City of mailing address:: Bellingham

State or Province of mailing address:: Washington

Country of mailing address::

Postal or Zip Code of mailing address:: 98225

Applicant Authority Type:: Inventor

**Primary Citizenship Country::** 

Status:: Full Capacity

Given Name:: Kenneth

Middle Name:: Bruce

Family Name:: Cooper

Name Suffix::

City of Residence:: Seattle

State or Province of Residence:: Washington

Country of Residence::

Street of mailing address:: 3410 West Blaine Street

City of mailing address:: Seattle

State or Province of mailing address::	Washington
Country of mailing address::	
Postal or Zip Code of mailing address::	98199
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Correspondence Information	
Correspondence Information	
Correspondence Customer Number::	23377
Representative Information	
Representative Customer Number::	

# **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Country::	Application number::	Filing Date::	Priority Claimed::
<del></del>			
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#### **Assignee Information**

**Foreign Priority Information** 

Assignee name::

**Microsoft Corporation** 

Street of mailing address::

One Microsoft Way

City of mailing address::

Redmond

State or Province of mailing address::

Washington

Country of mailing address::

Postal or Zip Code of mailing address::

98052